

## CHEKHOV AMONG THE DOCTORS: THE DOCTOR'S DILEMMA

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**G**IFTED with more psychological insight than his biographers and critics, Chekhov appraised his human condition and stated it with his usual concision:

Self-made intellectuals buy at the price of their youth what gently born writers are endowed with by nature. Go, write a story about a young man, the [grand]son of a serf, the son of a shopkeeper, a choirboy, brought up to respect rank, to kiss the priest's hand, to defer to others' opinions, to offer thanks for every slice of bread, flogged repeatedly, fond of dining with rich relatives, playing the hypocrite before God and man with no other cause than the accepted consciousness of his own unimportance—then tell how this young man presses the slave out of himself one drop at a time, waking up one fine morning to feel that real human blood flows in his veins, not the blood of a slave. . . . (Letter to Suvorin, January 9, 1889.)

Writing this in his 29th year, Chekhov interpreted his quest for identity as an emancipation. His wretched childhood and inferior education are formulaic, but his march to independence began when his father's small retail shop went bankrupt and the family moved to Moscow, leaving the 16-year-old boy to complete his education at the gymnasium at Taganrog, a grubby port on the Sea of Azov. He began to write short sketches, many wryly humorous, for the school paper. By the time he rejoined his family in 1879 to enter the medical school at Moscow, he had mastered the rudiments of the journeyman writer: brevity and speed. His next step toward independence developed when he became the effective head of the household, supporting his mother and younger siblings by writing innumerable sketches and squibs for the lower



Fig. 1. Portrait of Chekhov by Repin. The three photographs illustrating this article are reproduced by courtesy of the Theatre Collection, New York Public Library, Astor, Lenox, and Tilden Foundations, The Research Libraries, New York, N. Y.

stratum of the Moscow press. He wrote them at top speed, and his unrevised first drafts were "printable."

Chekhov received his medical degree in 1884 and was posted to a *zemstvo* hospital in the country some 30 miles outside of Moscow. He worked there for a year, trying in the meantime to establish a general practice in Moscow and, pressed by circumstances, continued to write in order to make ends meet for his family. All of Chekhov's early pieces were published under the pseudonym of Antosha Chekhonte. It requires little insight to recognize that this was a form of denial; he did not wish his medical colleagues to form an image of him as a writer. But his real name is only thinly veiled, and to it he affixed "*honte*," the French word for shame, whether knowingly or not remaining unknown. However, Chekhov's acquaintances and friends were chiefly drawn from literary and artistic circles. Most of them were struggling or merely scraping by; they were delighted to secure free of charge the services of their young friend, now a qualified physician. Paying patients did not flock to Chekhov, nor did he ever feel his income from medical practice was enough to warrant setting up an office. But his warm, generous nature made it impossible for him to refuse a call, and he continued to live off his literary output. Also, in 1884 he had his first hemoptysis. In retrospect, we know it was tuberculosis, but a single hemoptysis does not make a diagnosis, and Chekhov was quite willing to assume a posture of anosognosia. Repeated episodes of hemoptysis coupled with cough and constitutional symptoms slowly developed and, certainly after 1889, when his brother Nicholas died of tuberculosis, Chekhov was unable to maintain the façade of denial, at least to himself, though he avoided mentioning the disease by name to his family. The inroads of tuberculosis were slow and almost imperceptible; he suffered more conscious pain from hemorrhoids, often aggravated by alternating attacks of diarrhea and constipation. His letters contain more frequent allusions to his rectal problems than to his pulmonary disease, using one level of symptomatic reality to minimize the anxiety engendered by another.

A decisive event in Chekhov's literary career was a letter of praise he received in 1886 from D. A. Grigorovich, then a man of importance in Russian letters. Comments such as "You have a *real* talent, one which places you in the front rank of the coming generation" were coupled with advice to write less prolifically and to concentrate his energies.

It was not easy to cut down production, particularly when money was badly needed, but Chekhov, who had published 129 pieces in 1885 and 112 in 1886, retrenched to 66 in 1887 and only 12 in 1888. Numbers tell only part of the story; Chekhov was able to follow Grigorovich's sound advice because he had established relations with Alexis Suvorin, editor of *Novoe Vremia*, a magazine which not only had prestige but paid high rates. That the magazine's policies were right-wing, anti-libertarian, antiegalitarian and, of course anti-Semitic did not bother Chekhov at the time; he was apolitical. His later breach with Suvorin belongs to another chapter; by that time Chekhov had been exposed to repeated reviews admonishing him for keeping his art separate from life and holding as an example for him Tolstoy's commitment to social causes.

Chekhov's own view of his double life as physician and writer during the period 1886 to 1897, when he finally collapsed with a severe attack of tuberculosis, can be epitomized by two excerpts from his correspondence:

You advise me not to pursue two hares at a time and to abandon the practice of medicine . . . I feel more contented and more satisfied when I realize that I have two professions, not one. Medicine is my lawful wife and literature my mistress. When I grow weary of one, I pass the night with the other. This may seem disorderly, but it is not dull, and besides, neither of them suffers because of my infidelity. If I did not have my medical work, it would be hard to give my thought and liberty of spirit to literature. (Letter to Suvorin, September 11, 1888.)

It was scarcely two years since Grigorovich's letter had set him to writing seriously. The self-criticism inherent in rewriting first drafts, "rejecting his own thoughts," had shown him explicitly the value of "liberty of spirit," and he had a new sense of his own importance, having adopted a new (and double) persona. The following year he sent an autobiographical sketch for publication in a class album to his classmate, G. I. Rossolimo, one of the few physicians with whom he maintained acquaintanceship:

My work in medical sciences has undoubtedly had a serious influence on my literary development; it significantly extended the area of my observations, enriched my knowledge, and only one who is himself a physician can understand the true value of

this for me as a writer; this training has also been a guide, and probably because of my closeness to medicine, I have managed to avoid many mistakes. Familiarity with the natural sciences and scientific method has always kept me on my guard. . . . I do not belong to those literary men who adopt a negative attitude toward science, and I would not want to belong to those who achieve everything by cleverness. (October 11, 1889.)

An added dimension can be given this position statement from a comment of Chekhov's quoted by Ivan Leontiev-Scheglov:

A simple person looks at the moon and is moved as before something terribly mysterious and unattainable. But an astronomer looks at it with entirely different eyes . . . with him there cannot be any fine illusion! With me, a physician, there are also few illusions. Of course, I'm sorry for this—it somehow desiccates life.

Chekhov's success as a writer stemmed from his ability to adopt a detached clinical attitude, to observe people's conduct, their mixed motives, their compromises with reality—much as a sensible doctor looks at a patient. Consciously, he tried to create artistic unity out of life's disorder by assimilating his view of human behavior into literary expression. His eye was sharp for telling detail, his ear keen for the cadence of everyday speech, even the speech which partly conceals and partly reveals motive, and he had an almost intuitive grasp of character. His biographer Simmons writes, "In his infinite concern to avoid the superfluous . . . he achieved by artistic measure and economy of means a refinement of expression that was truly classical, and an illusion of reality—based on his favorite touchstones of objectivity, truthfulness, originality, boldness, brevity, and simplicity—that seemed quite complete." But, as is usually the case in fiction or drama, it is the *illusion* of reality which is created, and the *seeming* completeness, though it begins with the writer's work, depends in part upon the reader's ability (or willingness) to follow him in his desire and pursuit of the whole.

Literary success and public acclaim—he was awarded the Pushkin Prize in 1889—did not make Chekhov's life complete. Such phrases as "There is a sort of stagnation in my soul" and "For the lonely man, the desert is everywhere" can be lifted from his letters. He had a semi-conscious desire to expand his horizons of action, a motive which,

coupled with his frustration and loneliness, led to his famous trip to Sakhalin in 1890-1891. For a man who had half-admitted to himself that he had pulmonary tuberculosis, such a trip across the Siberian wastes before the days of the Trans-Siberian railroad was, objectively speaking, sheer folly. And to what end? Chekhov proposed a census of that remote dismal penal colony north of Japan which would be tantamount to a sociological survey (the term had not then been coined) of the life of the exiled felons. Moreover, he proposed to carry out the study without assistants. He prepared for it by reading everything about Sakhalin on which he could lay his hands. He sought help from official quarters but received almost none; the Czar's government was not interested in having the facts of life on its Devil's Island exposed to public view. It took Chekhov three months to get there, and he spent almost four months taking notes, interviewing as many convicts as he could, but it was a period during which he saw nothing but misery and human degradation. Any reasonable fool could have told him he was risking his health, wasting his energy, squandering his talents on a lost cause. But the trip was his catharsis, his private bell for inexplicable needs; possibly he finally resolved his quest for emancipation by comparing his "liberation of spirit" as physician and writer with the lot of the dead souls on Sakhalin. Some sins are not crimes against the state.

On his return he wrote *The Island of Sakhalin*, which was published in 1892, a straightforward piece of reportage describing conditions as he saw them. He had no conviction that such a free-lance study would persuade the government to modify its policies, nor did he ever mount a public campaign for reform, though he continued to correspond with individual convicts whose plight had touched him. Predictably, the book had no effect on penological policy. Viewed in context, Chekhov's mission seems almost a gratuitous act by a man who felt himself superfluous. And, having digested that slice of life, he was satisfied by converting it to a literary experience.

He made one futile gesture to find an audience for his ideas. In 1893 he conceived the notion of submitting *The Island of Sakhalin* as a thesis for the degree of Doctor of Medical Sciences which would have qualified him as a *privatdozent*, permitting him to lecture at the medical school. He enlisted the aid of Rossolimo, then well on his way to distinction as a neuropathologist, writing: "If I were a teacher, I

would try to draw my audience as deeply as possible into the area of the subjective feelings of patients, for I think that would prove really useful to the students."

Chekhov's desire to have a foot in academic medicine may have developed from his experiences the previous year when he had returned to active medical work by helping control a cholera epidemic near Melikhovo where he lived, but that could have been only an immediate precipitating cause. A deeper reason was his sensitivity to the emotions he saw being acted out by the people he knew, as well as the implicit recognition, known so well to any man with first hand medical experience, that these emotions are intensified, even uncovered, in the sickbed. Of course, the dean disregarded the petition for the degree, but it can be construed as an example of Chekhov's partly formed ideas on medical psychology (as distinct from clinical psychiatry, which then dealt chiefly with major organic and functional psychoses). It was half a century before the term "psychosomatic medicine" came into vogue, but we can credit Chekhov with having such an idea in embryo and for having derived it himself.

Chekhov's fascination with human conduct and motivation was deep-seated, and upon it depended his ability to create fictional characters who seemed "real" or "natural." Every critic has commented on the vast number of characters from all walks of life who populate Chekhov's pages. Yet Chekhov was not merely attracted to people as a passing parade; he presented their surfaces in order to illuminate their interiors, hence his famous dictum on the style of naturalism in the Russian Art Theatre with which he was closely identified from 1897 to his death in 1904:

Let everything on the stage be just as complicated and at the same time just as simple as it is in life. People just eat their dinner, just eat their dinner, and all the time their happiness is being established or their lives are being broken up.

Chekhov projected onto his own characters his personal mode of assimilating experience and reacting to it: the perception of reality from inner needs, regardless of external circumstances. Both in his own life and in his fictions the outlook and self-definition of individuals are informed by and result from an internalization of reality.

But one must exercise caution in pursuing Chekhov's psychological insights and analyzing particular stories as if they were designed to

illuminate psychological principles. Chekhov's psychology was based on the ideas current in his time, those of the late 19th century. He had no crystal ball to tell him that 20th century psychodynamics would emphasize the unconscious as a motive force, that its *res gestae* would be the ontogeny of individual cases, tracing current problems back to events in childhood and reconstructing elaborations from such starting points. Using the short story and the stage drama as his chosen media, Chekhov limited himself to presenting the "here and now," the situation as it exists in a small segment of time. On at least one occasion he tried to write a novel but found that the extended form was alien to him. Sharp as were his *aperçus* into an immediate situation, he usually lacked the ability to depict its evolution from initiating causes into florid symptoms.

Nor did Chekhov attempt to systematize or develop a set of generalizations from his insights. On many occasions he disavowed the idea that he, as a writer, should either teach or preach. Although, his early years excepted, he was not a miniaturist, he was a particularist. Much like a pointillist painter, he placed his sentences and short paragraphs on paper as if they were small, discrete spots of color on a canvas, creating a picture which became organized as a cognitive entity only when the reader held it at arm's length and examined it from a middle distance. With too close a view his images do not take shape, nor is the relation of one to another decisive; from too great a distance the particularity of the experience being rendered lacks substance, and even its color pales.

In some of Chekhov's short stories the psychological element is typological, for example: Gromov's break with reality in *Ward 6* is readily diagnosable as paranoid schizophrenia with transient, ill-structured ideas of persecution, solipsistic withdrawal, and mental deterioration; in *The Black Monk*, Kovrin experiences visual hallucinations with religious content; in *Grief*, the cab driver Potapov displays the need for catharsis when overwhelmed by the death of his son. But some of the most illuminating examples of psychopathology are to be found among the fictive physicians whom Chekhov created. It is in these, the literary counterparts of members of his chosen profession, that Chekhov most clearly shows his hand. The open question is: To what extent did Chekhov's own limited success in medicine contribute to the projection of doctors in his fictions? How did he internalize the reality of his own status? How did he transform life into letters? Let us examine a few of his doctors and see what light they shed on his dilemma.



Dr. Startsev, the hero of *Ionych* (1898), enters as the rural district medical officer stationed outside a small provincial town. He makes the acquaintance of the Turkin family, the pretentious leaders of the bourgeois intelligentsia, who seem to believe they are running a salon. He falls in love with their daughter Katerina, but she has her heart set on studying the pianoforte at the conservatory, and she trifles with him. Soon after she leaves town, Startsev opens his practice; despite his distaste for the narrow-minded provincial types, he prospers. Katerina returns, having found that her musical talent is inadequate for a career. She would now like to marry Startsev, but his interest in her has flickered out. Chekhov leaves him as a greedy, choleric bachelor whose original ideals have been corroded.

Doubtless Chekhov drew upon his own experiences in provincial towns for the setting, upon his own observations of more than one fellow-physician who succumbed to materialism, and upon any number of pseudointellectuals for the other characters. It is much the same ambience that Sinclair Lewis described in greater detail in *Main Street* and *Babbitt*; both Chekhov and Lewis knew the stifling effect of small towns and hated them. Chekhov's tale is a slice of life, but the picture he draws is too close to the real to be a complete fiction, and his figures are not heroic enough to support the idea of a myth. Underlying the denouement is a theme common to many of Chekhov's stories: namely, that men and women who attempt to develop an intimate relation, whether consummated or not, wind up lonely, frustrated, unhappy, alienated, and defeated. This tells us more about Chekhov than he might wish us to know, but precisely why his Dr. Startsev lacks either the ability to perceive his plight or is unable to escape from it remains uncharted.

A more complex failure is Dr. Ragin in *Ward 6* (1892), the director of a hospital in a small provincial town who gradually withdraws from the task of properly managing his understaffed, poorly equipped hospital, taking refuge in reading philosophy and history, drinking vodka, and eating cucumbers. This doctor rationalizes his maladresse by developing the idea that men must seek peace and satisfaction in themselves, not in the world around them. Though he maintains his internal equipoise, his stance is of little help to the psychotic patients in Ward 6, who are at the mercy of the brutal guard Nikita, who beats them frequently and cheats them of even their few kopecks. Dr. Ragin estab-

lishes a quasi-friendship with Gromov, a mildly paranoid schizophrenic on the ward, who contrives to be a philosopher of sorts. Dr. Ragin's inadequacy makes it easy for Dr. Khobotov, his scheming assistant, to force his resignation. Ultimately, after a financially ruinous trip to Moscow with a friend, Dr. Ragin is committed to Ward 6, where Nikita beats him and he dies of a stroke, having lost the comfort of his quietist philosophy, finally aware of the years of physical pain and moral suffering which his withdrawn way of life had inflicted on his defenseless patients.

As Chekhov's fiction goes, it is a long story, even a novella, and here he does have space and scope. Step by step, he shows the gradual nature of Dr. Ragin's withdrawal and his increasingly tenuous grasp of reality. The secondary characters are fleshed out; tension is increased by having first a patient, then a fellow-physician alternate as deuteragonist to the central character. Even as Chekhov leads the reader slowly into the unreal pseudophilosophical world of Dr. Ragin's prolix dialogues with Gromov, he returns him to the level of reality in the scenes with Dr. Khobotov and the intercalated episode of Dr. Ragin's financial ruin. One passage prefigures the existential mode; Dr. Ragin remarks: "My illness is only that in twenty years I've found only one intelligent person in the whole town, and he's a lunatic. There's no illness whatsoever; I simply fell into a bewitched circle from which there's no exit." As the proverb tells us: Life? One can never get out of it alive.

Shorter than *Ward 6* and narrower in scope is *A Dreary Story* (1889), relating the case of Dr. Stepanovich, a professor of medicine, who describes in the third person his failing mental and physical powers. Insomnia is his chief complaint, but he cannot find a satisfactory cause. The reader is not surprised when the aging professor unwittingly reveals that he is in love with his young ward Katya. Lust and illicit passion are alien to his self-controlled, rational persona; consequently he represses his feelings. The anxiety so engendered manifests itself as insomnia, fear of imminent death, and a congeries of minor psychosomatic symptoms. Much of this story's success depends upon the relatively simple nature of the protagonist's intrapsychic conflict which enables Chekhov to maintain the narrative flow at a single level.

Chekhov's doctors share a lack of self-confidence and purpose; he presents them as incomplete men in an advanced state of copelessness. To generalize that they are projections of himself is a simplistic notion

19  00.**Художественно-Общедоступный Театръ**

(Каротный рядъ, „ЭРМИТАЖЪ“).

Воскресенье, 8-го Октября:

**Дядя Ваня,**

сцени изъ деревенской жизни въ 4-хъ дѣйствіяхъ, А. Чехова.

(31-е представленіе).

**УЧАСТВУЮЩІЕ:**

Серебряковъ, Александръ Владиміровичъ,  
отставной профессоръ . . . . . В. В. Луженій,  
Елена Андреевна, его жена . . . . . О. Л. Книпперъ,  
Софія Александровна (Соня), его дочь отъ  
перваго брака . . . . . М. П. Лилина,  
Войницкая, Марья Васильевна, вдова тайнаго  
совѣтника, мать первой жены профессора . Е. М. Раевская,  
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Марина . . . . . М. А. Самарова,  
Работники . . . . . М. П. Григорьевъ.

Дѣйствіе происходитъ въ усадьбѣ Серебрякова.

Режиссеры Н. С. Станиславскій и Ва. М. Немировичъ-Данченко.

Декорации 1-го дѣйствія художника В. А. Симова.

**Начало въ 7<sup>1</sup>/<sub>2</sub> ч. веч., окончаніе около 11<sup>1</sup>/<sub>2</sub> ч. ночи.****Р Е П Е Р Т У А Р Ъ.**

Понедѣльникъ, 9-го Октября, въ 8-й разъ: „**Омѣгурочка**“,  
весенняя сказка, А. Н. Островскаго.  
Вторникъ, 10-го Октября, въ 31-й разъ: „**Чайка**“, драма А. П.  
Чехова.

Билеты на всѣ объявленные спектакли можно получать въ кассѣ театра,  
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На основаніи ВЫСШЕГОГО постановленія 5 мая 1902 года Высшаго Государственнаго Суда  
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100. Москва: Голубица; Москва: 1-й, 2-й, 3-й, 4-й, 5-й, 6-й, 7-й, 8-й, 9-й, 10-й, 11-й, 12-й, 13-й, 14-й, 15-й, 16-й, 17-й, 18-й, 19-й, 20-й, 21-й, 22-й, 23-й, 24-й, 25-й, 26-й, 27-й, 28-й, 29-й, 30-й, 31-й, 32-й, 33-й, 34-й, 35-й, 36-й, 37-й, 38-й, 39-й, 40-й, 41-й, 42-й, 43-й, 44-й, 45-й, 46-й, 47-й, 48-й, 49-й, 50-й, 51-й, 52-й, 53-й, 54-й, 55-й, 56-й, 57-й, 58-й, 59-й, 60-й, 61-й, 62-й, 63-й, 64-й, 65-й, 66-й, 67-й, 68-й, 69-й, 70-й, 71-й, 72-й, 73-й, 74-й, 75-й, 76-й, 77-й, 78-й, 79-й, 80-й, 81-й, 82-й, 83-й, 84-й, 85-й, 86-й, 87-й, 88-й, 89-й, 90-й, 91-й, 92-й, 93-й, 94-й, 95-й, 96-й, 97-й, 98-й, 99-й, 100-й.

Fig. 2. Playbill of *Uncle Vanya*, Moscow Art Theatre, 1900.

which will not stand under close scrutiny. But Dr. Lvov in *Ivanov* (1888) is young, unmarried, idealistic, and the moral conscience of the play; to that extent he bears a superficial resemblance to his author. However, Lvov stands aghast but impotent as Ivanov cruelly deceives and manipulates his wife, who is dying of tuberculosis. Lvov has a passionate desire to cure humanity's ills but he cannot prevail against Ivanov's cupidity and lechery. Ivanov's wife's distress is made more poignant by Chekhov's casting her as a Jewess who has been rejected by her family for marrying outside her faith and has no recourse. One may speculate that Chekhov was attracted to the theme of intermarriage because in 1886 he was sufficiently in love with a Jewish girl to consider marriage, a scheme which foundered when she would not apostasize and he would not consider civil marriage.

Equally impotent is Dr. Dorn in *The Sea Gull* (1896), an aging bachelor of 55, an engaged bystander to Treplev's love affair with Masha but even more fascinated by Treplev's play. He regrets his limitations: "You know, I've led a varied and discriminating life. I'm satisfied, but if it had ever been my lot to experience the exaltation that comes to artists in their moments of creation, I should have despised this earthly shell . . . and I'd have soared to the heights, leaving the world behind." Alas for his lofty *Anspruchsniveau*: when Treplev commits suicide, the doctor and would-be artist is immobilized; confronted by the suffering of his friends, he can say only, "What can I do, what can I do?"

Another aging, disillusioned doctor is Dr. Astrov in *Uncle Vanya* (written 1890, produced 1898). More interested in forestry than medicine, he comments, "Only God knows what our real vocation is": a fair statement of Chekhov's own plight. Astrov imagines that his reforestation scheme—even the 1890s had their ecological problems—is the plan of a scientist-artist-creator-savior whose change in nature can effect a change in man, a romantic notion which is insufficient to conceal that he is a burnt-out case. Although he is able to talk Uncle Vanya out of a suicidal gesture, he is not able to convince Elena (or himself) that his affection for her is substantial enough to be considered love. Nothing happens, nothing is consummated. Astrov is reduced to the vague hope "that when we are sleeping in our graves we may be attended by visions, perhaps even pleasant ones."

The last of Chekhov's stage doctors is Ivan Chebutykin, an army

doctor, in *Three Sisters* (1900-1901). The play deals with the blighted hopes of the principal characters, and Chebutykin's contribution to the general attitude of despair is to add further negative values. Incompetent as a doctor, mildly alcoholic, unlettered, and socially gauche, he is little more than a stock fool. In reply to Irmy's question about an incident on the boulevard he replies: "What happened? Nothing. Nothing worth talking about. It doesn't matter." The schoolteacher Kulygin attempts to draw the incident out of him, but he replies again: "I don't know. It's all nonsense." To which Kulygin responds: "In a certain seminary a teacher wrote 'nonsense' on a composition, but the pupil, thinking it was Latin, read 'consensus.'" Chebutykin is a grotesque caricature of a man. Instead of marrying the widowed mother of the three sisters (are we supposed to think of them as Fates?), he breaks the woman's clock, a symbolic defloration where none would be required, thereby foreclosing a successful resolution. He abdicates his responsibilities, even pretending ignorance about the arrangements for the duel in which Tusenbach is fated to die and leave Irina bereft. Pretending to know nothing, he becomes nothing, and is even willing to acknowledge his nonexistence:

Perhaps we imagine that we exist, but we don't really exist at all. . . . Perhaps I'm not even a man at all, but just imagine I've got hands and feet and a head. Perhaps I don't exist at all and only imagine that I walk and eat and sleep. . . . Oh, if only I didn't exist.

Finally, Chekhov has managed to reduce one of his doctors to existential nothingness.

There is no doctor in Chekhov's last play, *The Cherry Orchard* (1903-1904). Following his severe attack of tuberculosis in 1897, Chekhov gave up any semblance of practicing medicine and confined his waning energies to writing. His chief interest lay in the Moscow Art Theatre, which produced his plays, and through it he met the actress Olga Knipper, who became his wife in 1901. Having disposed of the archetype in Chebutykin, he no longer had any need to create lonely, hollow men out of his fictive physicians.

The most frequent comment about Chekhov's plays is that "Nothing happens." That is, "people just eat their dinner. . . ." At the same time the drama of life continues, and the course of these people's lives is being decided at the same time, but they are unable to influence events

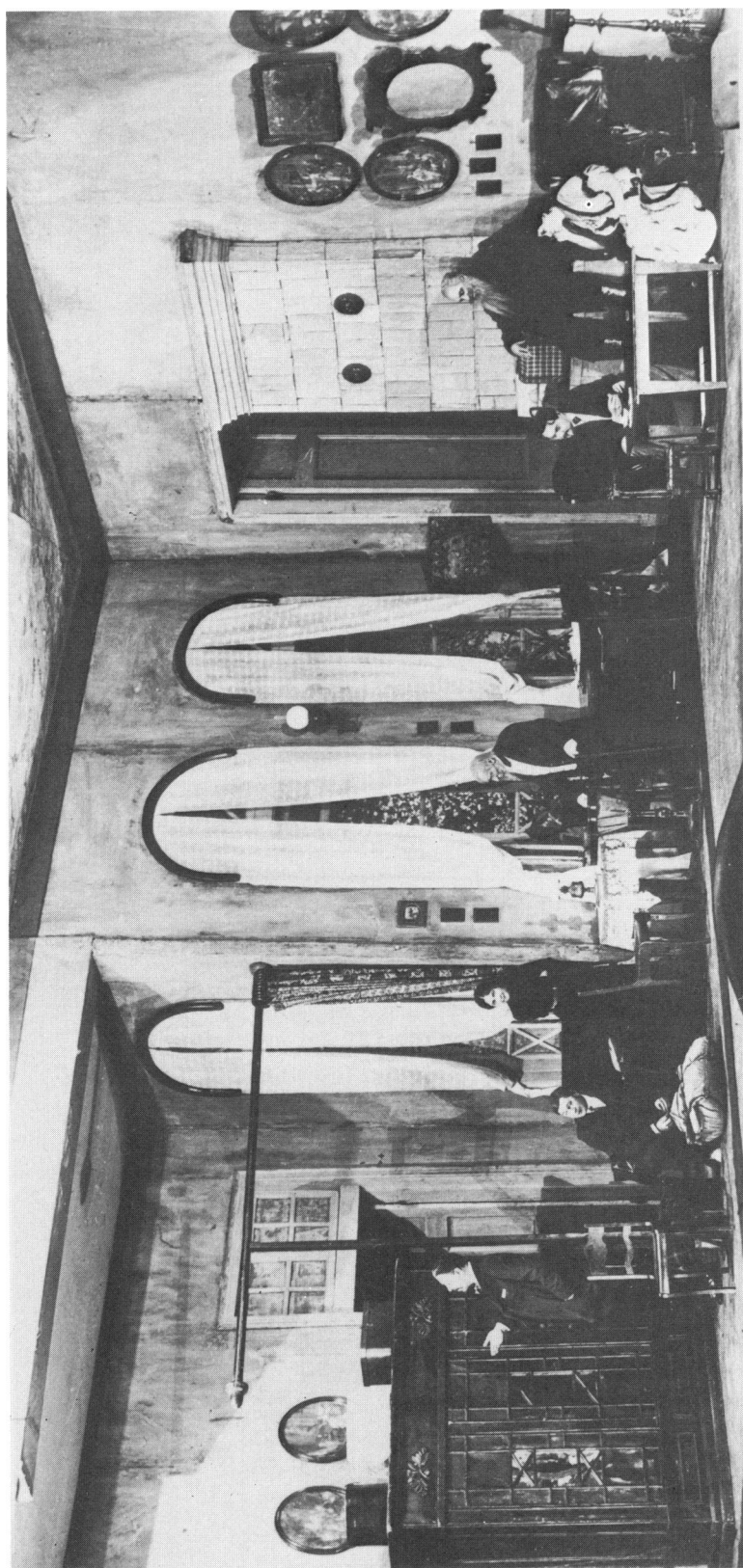


Fig. 3. The set and characters of *The Cherry Orchard* in the Moscow Art Theatre's New York production, 1926.

by insight or will. Even as Chekhov wrote his plays and stories, enjoyed the company of his friends, wrote letters, helped build schools and libraries, courted his wife, and ate his dinner, the tubercle bacillus continued its unremitting work of destruction. The germ which attacked him when he was a young man learning to heal the sick shortened his life, and there is no reason to doubt that for the last seven years of it he knew his time was short. In one sense, the "nothing happens" posture is a defense which implies "nothing is happening to me."

Chekhov died in Germany in 1904. When his doctor wanted to apply an ice bag to his chest, he looked up and said, "One does not put ice upon an empty heart." He then asked for a glass of champagne, drank it, and died. His body was returned to Moscow in a train marked Oysters. Had he been alive to witness it, the bon vivant in him would have commented on the felicity of the final marriage between champagne and oysters, but as it was, "nothing happened," and, as in Werther's sorrows, Charlotte, like a well-bred girl, went on eating bread and butter.